

**Technical Standards and Safety Authority** 345 Carlingview Drive

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Fax: 416.234.9169

Email:licencingandregistration@tssa.org Customer Service: 1.877.682.8772 www.tssa.org

## Application for Reinstatement as a Ski Passenger Ropeway Consultant Contractor

under Ontario's Technical Standards and Safety Act Elevating

Devices Regulation

TSSA Contractor Registratio	n No.:							
Company (Owner/Operator=):								
Corporation No:/Business Identification No:				Name of Contact:				
Bus. Telephone No:				Email Ad	Address:			
Please provide complete Mailing	address in the fi	elds provided b	elov	i				
Street No:	Street Name:		Unit/Suite:					
City/Town:	Province:				Postal/Zip Code:			
Bus. Telephone No:					Fax No:			
If your business location address	is <u>different</u> fron	n your mailing a	addı	ess, pleas	e complete this section			
Street No:	Street Name:				Unit/Suite:			
City/Town:	Town: Province:				Postal/Zip Code:			
Bus. Telephone No:					Fax No:			
Consultants (contractors) must regi for all applicable device classes. So				To be el	or work is <b>limited</b> * mark here			
					mechanic whose scope and device class.	experience is applica	adie to the	
Device Class	Consultatio to		V	Name of	Qualified Mechanic	Certificate Type	Certificate No.	
Class 8: Passenger Ropeway Passenger Ropeway - Chair Lifts with detachable grips								
Passenger Ropeway - Chair Lifts with fixed grips								
Passenger Ropeway – Gondola Lifts								
Passenger Ropeway – Reversible Ropeways								
Passenger Ropeway - Aerial Tramways								
Passenger Ropeway- Surface Bar Lifts								
Passenger Ropeway- Surface Lifts made of Fiber or Wire								

Carrier (tube tow)

Passenger Ropeway- Secondary

## **FEES**

Enter # of years operating									
without a	Current	Total	Contractor Registration	Fee			Total		Total
Registration	Year	Years	(Installation and/or Maintenance)	Type	Fee	Years		Fees Due	
			Passenger Ropeway Owner Consultant	Flat	233.00	х		=	

Total Reinstatement Fees	
Late Payment Fee	75.00
Total Amount Due	

Value in Box 2 to be entered in TSSA Service Prepayment Portal

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Click here to access TSSA Service Prepayment Portal

## All required fees must be prepaid for application to be processed. Fees are non-refundable.

## Appplicant's Statement: The undersigned applicant states( on behalf of the company) that

•His/her company when registered as a consultant (contractor) will comply with all requirements of the Technical Standards and Safety Act, Elevating Devices Regulation

•His/her company will ensure that all mechanics or engineers have access to the latest edition and revision of the code(s) applicable to the elevating devices on which they are assigned to work and that they will have full working knowledge of such codes

•Applicant has self ensured that supervisory staff, listed mechanics or engineers have full knowledge of the Technical Standards and Safety Act, Elevating Devices.
•This application is a declaration for authorization, knowingly making a false statement or furnishing false information is an offence under section 37 (1)(b) of the Technical Standard and Safety Act, 2000.

Date	Applicant's Official Capacity	Applicant's Name	Signature		